## Governor's Commission for a Drug Free Indiana

A Division of the



## **Comprehensive Community Plan**

**County: Vigo County** 

**LCC: Vigo County Local Coordinating Council** 

Original Plan Date Due: April 2014

**Update due: April 2015** 

**New Plan:** X Plan Update:

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**Vigo County Commissioners** 

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**Zip Code: 47807** 

## **Plan Summary**

**Mission Statement:** The Vigo County LCC is dedicated to educating the community about alcohol and other drug problems; assessing the needs; and initiating, coordinating and organizing comprehensive community plans to address these needs. The Vigo County LCC shall monitor compliance with the comprehensive community plan those programs receiving funds through its auspices. The Vigo County LCC shall also make formal recommendations to the Vigo County Commissioners and the County Council regarding the allocation of the Vigo County Drug Free Community Funds in compliance with applicable statutory guidelines.

## **History:**

The Vigo County Local Coordinating Council was organized in February 1990. Over the next six months the Council's committees on need assessment, prevention, treatment, law enforcement and by-laws met frequently to develop the basic community data and outline for organizational structure. These efforts formed the basis for the first Comprehensive Community Plan that was written in July of 1990. Throughout the years, plans have been updated and new ones have been written according to state guidelines.

Vigo County, the geographical area served by this LCC, is located in West Central, Indiana. Vigo County is comprised of 403.3 sq. miles, in twelve townships, on the western border of Indiana. 2009 population estimates from U.S. Census Quick Facts reveal 105,967 people living in the county (.1% change from 2000). Terre Haute, the county seat and largest city, has a population of 57,259 (-4% change from 2000). Vigo County has a population density of 262.7 persons per sq. mile. 21.4 % of the population is aged 18 and under (lower than the state rate of 24.7%) and 13.5% is aged 65 and older (higher than the state rate of 12.9%)

Since its inception in 1990 until 1996, the Vigo County LCC functioned as an all volunteer organization. Since September 1996 the council has



had a part-time coordinator to assist with the organization of the LCC. Yearly funding for the position's salary and supplies has enabled additional structure for the LCC, but the driving force continues to be all of the volunteer members of the council. The Coordinator resigned effective April 1, 2011 mandating the heightened efforts of volunteers to complete the 2011 plan. The resignation also prompted a review of possible alternatives to the current coordinator model.

The LCC is dedicated to educating the community about prevention, risk reduction, law enforcement and treatment associated with alcohol and other drugs and the problems associated with their use and misuse. The LCC reviews community assets and needs from state and local data and then initiates, coordinates and organizes the comprehensive community plan; data from a 2011 Vigo County Survey about alcohol and other drugs has been used to develop this plan. It also monitors compliance with the comprehensive community plan those programs receiving LCC funding.

**Summary of the Comprehensive Community Plan:** The Vigo County CCP includes two problem statements: 1. Vigo County has an identified problem with ATOD use/abuse by youth. 2. Vigo County has an identified problem with ATOD use/abuse by adults.

The Vigo County LCC meets monthly to consider reports from its standing committees and hear updates from local service providers not funded by LCC. The membership of each committee is generally comprised of individuals having specific interest and/or expertise in the area represented by the committee. It is the responsibility of the committees to remain knowledgeable regarding existing community services and programs as well as identify problems and unmet needs. Committee input and that of other providers is subsequently incorporated in the problem statements and recommended actions that comprise the Comprehensive Community Plan. Once a year each LCC-funded program representative makes a brief presentation to the full council followed by questions and answers.



An ad hoc grants review committee initially reviews funding applications for completeness and congruence with the CCP. Then prevention, treatment, and law enforcement standing committees review applications for program merit, budget and methods of evaluation and make recommendations to the full LCC. Final funding decisions are determined through a full LCC vote.

The Council monitors the progress of its funded programs through midyear and year-end reports, and conducts an ongoing process of community needs assessment. Yearly data reviews are made to update the CCP. One of the continuing goals of the Vigo County LCC is to broaden and diversify the membership base on all committees and the full LCC.



# **Membership List**

**County LCC Name: Vigo County LCC** 

Name	Organization	Race	Gender	Category
Rick Stevens	School Corporation	White	M	Education
Chris Mangia	West Central Indiana Economic Development District	White	F	Community Organization
Louise Anderson	ISU	White	F	Health
Brandon Halleck	CHANCES for Indiana Youth	White	M	Youth
Sara Milner	Mental Health America	White	F	Civic Organization
Zoe Franz	TH Regional Hospital	White	F	Treatment
Jim Bowman	Vigo County Alcohol and Drug Program	White	M	Treatment
Deb Hodson	Hamilton Center	White	F	Treatment
Myra Wilkey	Mental Health America	White	F	Treatment
<b>George Fields</b>	Next Step Foundation	White	M	Treatment
Bernie Burns	Vigo County Sheriff's Dept	White	M	Law Enforcement
Chris Wrede	Prosecutor's Office	White	F	Justice
Bill Turner	Indiana State Excise Police	White	M	Law Enforcement
Jason Brentlinger	Terre Haute Police Dept	White	M	Law Enforcement
Joe Newport	Indiana State University Police Dept	White	M	Law Enforcement
Pam Connelly	DCS	White	F	Child Services
Jack Tanner	Freebirds Solution Center	White	M+	Treatment



Jamie Royal	Cummins	White	F	Treatment
<b>Deb Stevens</b>	Union Hospital Maternal Health	White	F	Treatment
Terry Cohen	ICJI	White	M	Government
Jaymie Barrett	FSA Counseling Services	White	F	Treatment
Veronica Dougherty	Doumer Group	White	F	Business
Morgan Lee	Youth Representative	White	F	Prevention
Rick Decker	Terre Haute Police Dept	White	M	Law Enforcement
Josh Michael	Gibault	White	M	Treatment

## **Problem Identification**

# A. The adults of Vigo County are abusing alcohol, marijuana, methamphetamine and other drugs.

## **B. Supportive Data:**

- 1. The Department of Child Services (DCS) reported 300 Child In Need of Services (CHINS) during 2013, up from 266 cases identified in 2012. There were 194 removals of children from their homes and it is estimated by DCS that alcohol and/or drugs were involved in 2/3 of these cases.
- 2. Access to Recovery, a treatment and recovery service for individuals with methamphetamine addictions, reported 351 individuals referred for post incarceration treatment and other support services during



- 2013. This number increased from 220 individuals referred during 2011 and 336 individuals referred in 2012.
- 3. Vigo County Community Corrections Work Release Program reported a total of 135 participants with drug or alcohol related charges during 2013.
- 4. Hamilton Center reported that 1155 adults sought treatment services for alcohol or drug related issues during 2013. Cummins Behavioral Health Systems reported that 242 charges related individuals were receiving addictions related services during fiscal year 2012-2013 compared to 213 receiving services during 2010.
- 5. Indiana State police report that 21 meth labs were seized during 2013. Number seized during 2012 was 15.
- 6. Data provided by the Vigo County Sheriff's Department indicates that 173 adults were arrested by that department for alcohol and drug related charges during 2013 including 92 arrests for Operating a Vehicle while Intoxicated (OVWI), and 17 arrests for possession of marijuana/hashish. Also, 16 for Possession of a controlled substance and 6 for possession of methamphetamine.
- 7. Drug Court provided services for 127 defendants during 2013. As of December 31, 2013, Drug Court had 78 defendants in the program with a capacity of 80 (mandated by the Indiana Judicial Center). Of those 85 are DWI cases, 17 Meth cases, and 13 for possession of a controlled substance.
- **8.** Vigo County had a 3% failure rate with alcohols sales compliance checks during 2013. This is down from the 4% failure rate during 2012, per Indiana State Excise Police. There were 195 alcohol compliance checks conducted in Vigo County with 6 violations noted.

#### End of Year 1 Update:

#### **End of Year 2 Update:**



#### Final Update (end of Year 3):

#### C. Goals:

- See a reduction in the number of crimes associated with addictive behavior processed through the judicial system for issues relating to alcohol and other drugs.
- See an increase the number of individuals seeking and receiving supportive services for alcohol and other drug addiction.

#### D. End of Year 1 Annual Benchmarks:

#### **End of Year 2 Annual Benchmarks:**

Final Report (end of Year 3):



### **E. Objectives:**

- 1. Support training, education, equipment purchases for law enforcement agencies and activities that address alcohol and other drug issues.
- 2. Support law enforcement and judicial capacity needs as they relate to alcohol and drug abuse.
- 3. Provide funding that will allow for the support and increase of the availability of substance abuse treatment and intervention services in Vigo County, including staff training related to the assessment and need for treatment practices, counseling support and after care services.
- 4. Support equipment, training and the provision of program supplies that address needs for individuals seeking treatment services.
- 5. Support prevention programming and activities for adults in Vigo County that addresses ATOD related issues.

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- A. Problem Statement #2: The youth of Vigo County are abusing alcohol, tobacco and other drugs.
- **B. Supportive Data:**



- 1. Tobacco use by youth was an identified survey related issue in Vigo County. Local tobacco education and prevention programs served 7 youth through its TAP/TEG programs in 2012 but this program has been discontinued.
- 2. Kids Count Data 2013 lists Vigo County as having 24% of its children living in poverty.
- 3. Excise Police report that there were 269 licensed alcohol sales outlets during 2012. Vigo County ranks 77<sup>th</sup> out of 92 Indiana Counties for highest alcohol retail outlets. There were 6 violations out of 195 alcohol compliance checks held during 2013.
- 4. Indiana State University police made 42 (46) arrests for OVWI during 2013, 11 were students and 31 were non students.
- 5. Hamilton Center reported that 19 (24) adolescents received substance abuse related treated supports during 2013.
- 6. Vigo County Juvenile Probation Department reported a total of 136 alcohol or drug related offenses during 2013.
- 0 (11) possession of alcohol
- 2 (72) minor consumption
- 27 (21) possession of marijuana
- 2 (13) possession of a controlled substance
- 0 (11) DUI
- **7.** Child In Need of Services (CHINS) 330 (2013) compared to 179 (2012) (Indiana Prevention Resource Center, County Profiles Data, 2013.)
- 8. Statistically significant findings from the 2013 *Indiana Alcohol, Tobacco, and Other Drug Use* survey include:

Students from Vigo County School Corporation reported prevalence rates higher than the state rates. In particular, students reported prevalence rates for smokeless tobacco, cigars, pipe, marijuana, cocaine, hallucinogens, and prescription drugs that were higher than the state rates. However, 12th grade students reported prevalence rates for cigarettes, alcohol, and synthetic marijuana that were lower than the state rates. Specifically...



**Lifetime prevalence rates** were higher than the state rates for cigarettes (8th), smokeless tobacco (8th), cigars (8th and 10th), pipe (10th), alcohol (8th), marijuana (8th and 10th), cocaine (12th), hallucinogens (10th and 12th), and prescription drugs (10th). However, lifetime prevalence rates were lower than state rates for cigarettes (12th) and synthetic marijuana (12th).

Monthly prevalence rates were higher than the state rates for cigars (10th), pipe (10th and 12th), marijuana (10th), cocaine (10th), crack (12th), methamphetamines (12th), and prescription drugs (8th and 10th). However, monthly prevalence rates were lower than the state rates for cigarettes (12th), and alcohol (12th).

Binge drinking rates were lower than the state rates for 12th grade.

#### **End of Year 1 Update:**

**End of Year 2 Update:** 

#### Final Update (end of Year 3):

#### C. Goals

- Decrease the number of youth involved in the judicial system for issues relating to ATOD issues.
- See an increase in the number of youth seeking and provided treatment services for alcohol, tobacco and drug related use and abuse.

#### End of Year 1 Annual Benchmarks:

#### **End of Year 2 Annual Benchmarks:**

#### Final Report (end of Year 3):



#### **D. Objectives:**

- 1. Provide science based programs to youth and families that address risk protective factors to aid children and families in the prevention of substance abuse.
- 2. Support training, education, equipment purchases for law enforcement agencies and activities that address alcohol and other drug issues affecting youth.
- 3. Law enforcement and judicial capacity needs will be supported by the LCC as they relate to alcohol and other drug abuse issues affecting youth.
- 4. Provide funding that will allow for the support and increase of the availability of substance abuse treatment services in Vigo County, including staff training related to the assessment and need for treatment practices, counseling support and after care services for youth.
- 5. Support equipment and program supplies that address needs for youth seeking treatment services.
- 6. Support prevention programming and activities for youth in Vigo County that addresses ATOD related issues.

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End of Year 2 Update:		
Final Update (end of Year 3):		
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**Next Annual Update Due: April, 2015** 



#### Next Comprehensive Community Plan Due: April 2018

#### Disclaimer:

You agree that the information provided within this Plan is subject to the following Terms and Conditions. These Terms and Conditions may be modified at any time and from time to time; the date of the most recent changes or revisions will be established by the Commission and sent electronically to all Local Coordinating Councils.

#### **Terms and Conditions:**

The information and data provided is presented as factual and accurate. I hereby acknowledge that I can be asked to submit proper documentation regarding the data submitted within the Plan. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

The Local Drug Free Communities Fund must be spent according to the goals identified within the plan. I hereby acknowledge that I can be asked to submit proper documentation regarding funds that are collected, allocated, and disbursed within the county. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

**Initials: TC** 

